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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	64032/P008US/10307656
	First Inventor	Yi Gong
	Title	LOCATION POSITIONING IN WIRELESS NETWORKS
	Express Mail Label No.	EV256032336US

1659 U.S. PTO
 10/635367
 08/06/03

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 43] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2] 5. Oath or Declaration [Total Sheets 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies
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ACCOMPANYING APPLICATIONS PARTS	
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement [<input checked="" type="checkbox"/> Power of Attorney] (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-SB/08 [<input checked="" type="checkbox"/> Copies of IDS Citations] 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Checks in the amount of \$2,526.00 & \$40.00	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number: _____ OR Correspondence address below

Name	FULBRIGHT & JAWORSKI L.L.P. R. Ross Viguet		
Address	2200 Ross Avenue, Suite 2800		
City	Dallas	State	TX
Zip Code	75201-2784		
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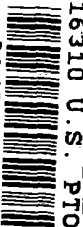
Name (Print/Type)	R. Ross Viguet	Registration No. (Attorney/Agent)	42,203
Signature		Date	August 6, 2003

Utility Patent Application Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV256032336US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 6, 2003 Signature: (John Pallivathukal)

08/06/03



16310 U.S. PTO

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FEE TRANSMITTAL for FY 2003		Complete if Known	
<small>Effective 01/01/2003, Patent fees are subject to annual revision.</small>		Application Number	Not Yet Assigned
		Filing Date	August 6, 2003
		First Named Inventor	Yi Gong
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	64032/P008US/10307656
TOTAL AMOUNT OF PAYMENT		(\$) 2728.00	

METHOD OF PAYMENT (check all that apply)

Check
 Credit Card
 Money Order
 Other
 None

Deposit Account

Deposit Account Number: 06-2380

Deposit Account Name: Fulbright & Jaworski L.L.P.

The Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below
 Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)			
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
1053	130	1053	130	Non-English specification		
1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
1251	110	2251	55	Extension for reply within first month		
1252	410	2252	205	Extension for reply within second month		
1253	930	2253	465	Extension for reply within third month		
1254	1,450	2254	725	Extension for reply within fourth month		
1255	1,970	2255	985	Extension for reply within fifth month		
1401	320	2401	160	Notice of Appeal		
1402	320	2402	160	Filing a brief in support of an appeal		
1403	280	2403	140	Request for oral hearing		
1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1452	110	2452	55	Petition to revive - unavoidable		
1453	1,300	2453	650	Petition to revive - unintentional		
1501	1,300	2501	650	Utility issue fee (or reissue)		
1502	470	2502	235	Design issue fee		
1503	630	2503	315	Plant issue fee		
1460	130	1460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40.00	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))		
1810	750	2810	375	For each additional invention to be examined (37CFR 1.129(b))		
1801	750	2801	375	Request for Continued Examination (RCE)		
1802	900	1802	900	Request for expedited examination of a design application		
Other fee (specify)						
*Reduced by Basic Filing Fee Paid					SUBTOTAL (3) (\$)	40.00

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	750.00
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)					750.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	109	-20** =	89	x	18.00	=	1602.00
Independent Claims	7	-3** =	4	x	84.00	=	336.00
Multiple Dependent						=	

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					1938.00

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	R. Ross Viguet	Registration No. (Attorney/Agent)	42,203
Signature		Telephone	(214) 855-8185
		Date	August 6, 2003

Fee Transmittal

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